FORM DEC SUIND WEIL Processing Section Section 11 700h

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1435	566								
OMB APPROVAL									
OMB Number:	3235-0076								
Expires:									
Estimated average burden									
hours per respon	se16.00								

SEC USE	ONLY
Prefix DATE REC	Serial
DATE REC	EIVED
1	1

Private Placement of Limited Partnership Interests in Flexpoint Ford Overage Fund II, L.P. Tiling Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	□ ULOE PROCESSED
ype of Filing: New Filing Amendment	_
A. BASIC IDENTIFICATION DATA	MAY 2 2 2008 E-
. Enter the information requested about the issuer	THOMCON DELETERS
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	THOMSON REUTERS
lexpoint Ford Overage Fund II, L.P.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
676 N. Michigan Ave., Suite 3300, Chicago, Illinois 60611	(312) 327-4520
Address of Principal Business Operations (Number and Street, City, State, Zip Code) if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private equity investment fund formed for the purpose of making investments in equity and o	lebt securities of companies.
The of During Constitution	
Type of Business Organization Corporation Imited partnership, already formed other (p	ilease specify):
business trust limited partnership, to be formed	
Month Year	4400
Actual or Estimated Date of Incorporation or Organization: 03 08 Actual Estimates actual Estimates of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	nated
CN for Canada; FN for other foreign jurisdiction)	DE
GENERAL INSTRUCTIONS	08050103
ederal:	00000103
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (17d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manuall shotocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
information Required: A new filing must contain all information requested. Amendments need only report hereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s JLOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle	•

 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years: Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply:
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
Check Box(es) that Apply: R Promoter Beneficial Owner Executive Officer Director R General and/or
Managing Partner
Full Name (Last name first, if individual)
Flexpoint Ford Management, L.P. (general partner of the issuer)
Business or Residence Address (Number and Street, City, State, Zip Code)
676 N. Michigan Ave., Suite 3300, Chicago, Illinois 60611
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Flexpoint Ford Ultimate Management, LLC (general partner of the general partner of the issuer)
Business or Residence Address (Number and Street, City, State, Zip Code)
676 N. Michigan Ave., Suite 3300, Chicago, Illinois 60611
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Ford, Gerald J.
Business or Residence Address (Number and Street, City, State, Zip Code)
676 N. Michigan Ave., Suite 3300, Chicago, Illinois 60611
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Edwards, Donald J.
Business or Residence Address (Number and Street, City, State, Zip Code)
676 N. Michigan Ave., Suite 3300, Chicago, Illinois 60611
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	NFORMATI	ION ABOU	r offeri	NG				
									Yes	No			
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									x			
2.									c 1.00	*00,000			
۷.	W Hat is	the million	um mvesm	iciit tiiat w	iii be acce	pted from a	iny marvia	uai:		*******		Yes	No
3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?			·····	***************************************		K	
4.						vho has bee							
						of purchase ent of a brok							
						ore than five ion for that				ciated pers	ons of such		
Ful			first, if indi		- Intollinati	-	- CIORCI OI I	icalci olily	-				
Bus	iness or	Residence	Address (N	lumber and	i Street, C	ity, State, Z	ip Code)						
Nar	ne of Ass	sociated Br	oker or De	aler							. =		
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers				· · · · · ·		
	(Check	"All States	" or check	individual	States)		•••••	·-···	•••••			□ VI	States
	AL	AK	AZ	AR	CA	CÖ	CT	DE	DC	FL	GA	HI	ID
	IL	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE CO	NV	NH	NJ	NM	NY VT	NC VA	ND	OH WW	OK	OR WY	PA]
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV]	WI	WYJ	PR
Ful	l Name (l	Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						
Nar	ne of Ass	ociated Br	oker or De	aler									
<u></u>	:- WL	: D	I intend ties	- C-1:-:4-J	1,	to Solicit	D.,					•	
Stat												□ AI	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	NE)	NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI) OH)	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UŢ	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (Last name	first, if indi	ividual)							. <u>.</u>		
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zin Code)						
						,	. ,						
Nar	ne of Ass	ociated Br	oker or De	aler									
Stat	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
	(Check "All States" or check individual States)							☐ AI	States				
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	TL MT	IN NIE	IA	KS)	(NI)	LA	ME)	MD	MA	MI	MN	MS	MO
	MT)	NE SC	NV SD	(NH) (NT)	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

^{*}The General Partner reserves the right to accept smaller participations from time to time.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0	\$ 0
	Equity		s 0
	Common Preferred		
	Convertible Securities (including warrants)	s 0	s 0
	Partnership Interests		; 0
	Other (Specify)		s 0
	Total		s 0
	Answer also in Appendix, Column 3, if filing under ULOE.	*	<u> </u>
	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors	0	s 0
	Non-accredited Investors	N/A	s N/A
	Total (for filings under Rule 504 only)	N/A	s N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		D.II. 4
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$_N/A
	Regulation A	N/A	s N/A
	Rule 504	N/A	s N/A
	Total	N/A	s N/A
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	ж	\$_0
	Printing and Engraving Costs	×	<u>\$ 50,000</u>
	Legal Fees	к	\$ 500,000
	Accounting Fees	ж	\$ 50,000
	Engineering Fees	K	\$ 0
	Sales Commissions (specify finders' fees separately)	x	\$ 0
	Other Expenses (identify) Organizational and start-up fees, postage, travel and general expenses	x	<u>\$</u> 200,000
			\$ 800,000

^{*}The General Partner reserves the right to offer a greater amount of limited partnership interests.

۲.	OFFERING PRICE	NUMBER	OF INVESTORS	EXPENSES AND	D USE OF PROCEEDS

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		<u>\$ 449,200,000</u>
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and fthe payments listed must equal the adjusted gross	
		Payments to Officers.	
		Directors, & Affiliates	Payments to Others
	Salaries and fees	× \$ 54,000,000	* × \$ 0
	Purchase of real estate	\$ <u>0</u>	_ x \$_0
	Purchase, rental or leasing and installation of mac	hinery [R] \$_0	_ x \$ <u>0</u>
		ilities	_
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset	ue of securities involved in this	\$ 391,000,000
	- ·	x \$ 0	·· -
		<u> </u>	
	Other (specify):		<u></u> \$ 0
		× \$_0	× \$_0
	Column Totals	x \$ 54,000,00	90 x \$ 395,200,000
	Total Payments Listed (column totals added)	<u>k</u> \$_	449,200,000
		D. FEDERAL SIGNATURE	
sig	nature constitutes an undertaking by the issuer to fur	undersigned duly authorized person. If this notice is filed under I nish to the U.S. Securities and Exchange Commission, upon write redited investor pursuant to paragraph (b)(2) of Rule 502.	Rule 505, the following ten request of its staff,
Issi	uer (Print or Type)	Signophy Dato	
Fle	expoint Ford Overage Fund II, L.P.	W/////////////////////////////////////	mæ
	me of Signer (Print or Type) onald J. Edwards	Thile of Sign (Pricti or Type) Managing Partier of Flexpoint Ford Ultimate Management, LLC, the general partn Management, L.P., the general partner of Flexpoint Ford Overage Fund II, L.P.	er of Flexpoint Ford

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE							
Is any party described in 17 CFR 230,262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🗷					
See Appendix, Column 5, for state response.							
The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit D (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form					
The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion furn	ished by the					
ter has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behal	f by the	undersigned					
thorized person.	·	-					
Print or Type) Signatura/// Date							
sint Ford Overage Fund II, L.P. 513.26	Ø)						
Print or Type) Title (Print of Type)							
	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit D (17 CFR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption has the burden of establishing that these conditions have been satisfied. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption has the burden of establishing that these conditions have been satisfied. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption has the burden of establishing that these conditions have been satisfied. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption (ULOE) of the state in which this notice is filed and understands that the issuer clair of this exemption (ULOE) of the state administrator of a	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes provisions of such rule? See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a no D (17 CFR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furn issuer to offerees. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the of this exemption has the burden of establishing that these conditions have been satisfied. Print or Type) Signature Signature Title (Print or Type) Title (Print or Type) Title (Print or Type) Title (Print or Type) Managing Partyer of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford University and the state of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford University and the state of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ultimate Management, LLC, the general partner of Flexpoint Ford Ult					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PPENDIX					
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
AK		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
AZ		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
AR		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
CA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
со		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
СТ		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
DE		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
DC		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
FL		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
GA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
ні		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
ID		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
IL		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		\times	
IN		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
IA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
KS		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
KY		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
LA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
МЕ		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
MD		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
МА		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
МІ		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		\times	
MN		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	
MS		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	

^{*}The General Partner reserves the right to offer a greater amount of limited partnership interests.

	APPENDIX										
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
мо		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
мт		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NE		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NV		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NH		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NJ		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NM		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00				
NY	_	X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
NC		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
ND		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
ОН		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
ок		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
OR		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
PA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
RI		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
SC		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
SD		X	Up to \$450,000,000 in timited partner interests*	0	\$0.00	0	\$0.00		X		
TN		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		×		
TX		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
UT		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
VT		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
VA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		× ×		
WA		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
wv		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		
WI		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X		

^{*}The General Partner reserves the right to offer a greater amount of limited partnership interests.

				APP	ENDIX					
1	2 Intend to sell to non-accredited		Type of security and aggregate offering price		Type o	4 f investor and		under Sta	ification ate ULOE attach ation of	
	investor	s in State	offered in state (Part C-Item 1)		amount purchased in State (Part C-Item 2)				waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00	-	X	
PR		X	Up to \$450,000,000 in limited partner interests*	0	\$0.00	0	\$0.00		X	